KENTUCKY REGISTRY OF ELECTION FINANCE

140 Walnut Street, Frankfort, KY 40601-3240 (502) 573-2226 / FAX (502) 573-5622 www.kref.ky.gov

www.kre	ef.ky.go	V			•	
WAIVER FROM FILING CANDIDATE ELECTION FINANCE STATEMENT Please type or print					Date Received	
NOTE: TI	his form	o be filed only by candidates wh	ho have an authorized campaign	committee registered on their behalf.	•	
Candidate	Name			// Date of Birth	Date Approved	
Mailing address (including city, state and zip)				() Daytime Telephone Number		
State the	name of	the authorized committee registe	ered on behalf of candidate			
	•) relieves a candidate of the the following conditions are		ling a CANDIDATE ELECTION F	FINANCE STATEMENT	
	1.	The candidate has an au	uthorized campaign commi	ttee.		
	2.	The candidate shall surre committee within five (5)		ontribution to the treasurer of th	e principal campaign	
	3.	Contributions received by check, money order or other written instrument shall be endorsed directly to the committee and shall not be cashed, deposited or used in any way by the candidate.				
	4.	No contribution shall be commingled with the candidate's personal funds or accounts.				
	5.	The candidate shall not make any unreimbursed expenditure for his or her campaign. However, this does not preclude a candidate from making an expenditure from his or her personal funds to the authorized campaign committee, which shall be reported by the committee as a contribution received from the candidate.				
	6. This waiver shall continue in force only as long as the candidate complies with the conditions set forth above.					
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relieved	from fi	ing the CANDIDATE ELEC		long as I comply with these con IENT. I will immediately notify d by KRS Chapter 121.		
-		Date signed		Signature of Candida	ute	



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